

FEC FORM 2

STATEMENT OF CANDIDACY

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SECRETARY OF THE SENATE
14 NOV -4 AM 10:38

1. (a) Name of Candidate (in full) Benjamin E. Sasse		
(b) Address (number and street) 105 E 6th Street		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Fremont NE 68025-5029		2. Candidate's FEC Identification Number S4NE00090
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought Senate
6. State & District of Candidate NE 00		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Ben Sasse for U.S. Senate Inc.		
(b) Address (number and street) 105 E 6th Street		
(c) City, State, and ZIP Code Fremont NE 68025-5029		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Legacy Victory Committee 2014		
(b) Address (number and street) 901 N Washington Street Suite 700		
(c) City, State, and ZIP Code Alexandria VA 22314-1535		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Benjamin E. Sasse 	Date 10/26/2014
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

New Senate Majority 2014

(b) Address (number and street)

801 N Washington Street
Suite 700

(c) City, State and ZIP Code

Alexandria

VA

22314-1719

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

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NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7115
PHO E: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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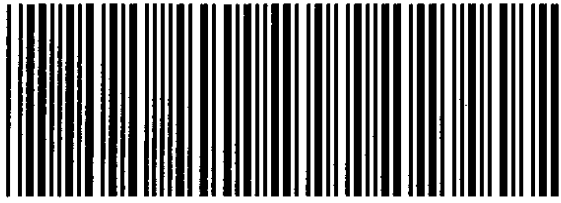
PREPARER

DH

DATE PREPARED

11-4-14

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SEN PATCH



SEN PATCH

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